



# ABE/GED/ESOL REGISTRATION

2019-2020



## Tom P. Haney Technical Center (HTC) APPLICATION FOR ADMISSION / RE-ENROLLMENT

Have you ever attended Haney Technical Center?  Yes  No

If yes, what year and program? Year: \_\_\_\_\_ Program: \_\_\_\_\_

Program(s) of interest: \_\_\_\_\_

What is your primary reason for attending Haney Technical Center?

- Learn skills for personal use or interest only
- Receive specialized training to begin a new career
- Improve skills for my current or past career area

<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>

<input type="checkbox"/> Male <input type="checkbox"/> Female		
<i>Gender</i>	<i>Social Security Number*</i>	<i>Date of Birth</i>

<i>P.O Box or House Number and Street Address</i>	<i>City</i>	<i>State</i>	<i>Zipcode</i>	<i>County</i>

<i>Home Phone Number</i>	<i>Cell Phone Number</i>	<i>Email Address</i>

Other names by which you may be known (maiden, etc.): \_\_\_\_\_

**Ethnicity:** Are you Hispanic or Latino?

- Yes, Hispanic or Latino
- No, **Not** Hispanic or Latino

**Race:** Select one or more of the following:

- American Indian or Alaskan Native
- Asian
- Black
- Native Hawaiian/Other Pacific Islander
- White/Caucasian



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*\*FL Statute 1008.386-When a student enrolls in a public school, the district school board shall request that the social security number be provided. The disclosure of the social security number is voluntary.*

### EMERGENCY CONTACTS & HEALTH

<i>Student's Last Name</i>	<i>First Name</i>	<i>Middle Name</i>

#### EMERGENCY NOTIFICATION INFORMATION:

Completion is **required for all students**. If you are under 18, parent or guardian information must be included.

1.			
<i>Name</i>	<i>Relation</i>	<i>Main Telephone</i>	<i>Alternate Telephone</i>

Haney Technical Center has my permission to release any information concerning my enrollment to the above contact.     **Yes**     **No**

2.			
<i>Name</i>	<i>Relation</i>	<i>Main Telephone</i>	<i>Alternate Telephone</i>

Haney Technical Center has my permission to release any information concerning my enrollment to the above contact.     **Yes**     **No**

Any medical diagnosis?     Yes     No

If yes, what diagnosis? \_\_\_\_\_

Any medications?     Yes     No

If yes, what medications? \_\_\_\_\_

**Disability: (check one)**

- Self-identified, receiving accommodations, WFE 504/ADAAA level evaluated (A, B, C)
- Self-identified, receiving accommodations, level not evaluated (I)
- Self-identified, not requesting/receiving special instructional services (N)
- Not applicable/not self-identified (Z)



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### Employment & Student Status

WDIS

**First Time:** *(select one)*

- First-time student in any college, university or technical center *beyond high school*  
 Not first-time student

**Citizenship:** *(select one)*

- U.S. Citizen (C)  
 Non-Resident Alien (A)  
 Permanent Resident Alien (P)

### Education and Training - Highest school grade completed *(select one):*

- |  |   |
|--|---|
| <input type="checkbox"/> No school grades completed (ZZ)<br><input type="checkbox"/> Completed at least part of 1 <sup>st</sup> -11 <sup>th</sup> grade:<br>Highest grade completed: _____<br><input type="checkbox"/> Completed 12 <sup>th</sup> grade,<br>did not attain diploma or equivalency (12)<br><input type="checkbox"/> Earned high school diploma (D1)<br><input type="checkbox"/> Earned high school equivalency (GED) (G1)<br><input type="checkbox"/> Have disability and attained Certificate of<br>Attendance/Completion (15) | <input type="checkbox"/> Completed some college (16)<br><input type="checkbox"/> Earned a Career Certificate (17)<br><input type="checkbox"/> Earned an Associate in Applied Sciences degree (18)<br><input type="checkbox"/> Earned an Associate of Science degree (19)<br><input type="checkbox"/> Earned an Associate of Arts degree (20)<br><input type="checkbox"/> Earned a Bachelor's Degree (21)<br><input type="checkbox"/> Attained beyond a Bachelor's Degree (22) |
|--|---|

**Where this level was achieved:**  U.S. based school     Non-U.S. based school

List all high schools, colleges, and technical centers below, beginning with the most recent school first. Mail or deliver transcripts to the Student Services office.

School Name	State	Dates of Attendance		Did you receive a Degree, Diploma, or Certificate?	Type of Degree, Diploma, or Certificate
		From	To		

**Military Status:** *(check one)*

- No Military History (Y)  
 Active Duty (A)  
 Eligible Dependent (D)  
 Veteran (Service Dates Unknown) (E)  
 Active Member of the National Guard (N)  
 Active Member of the Reserves (R)  
 Veteran (Service Prior to 9/11/2001) (V)  
 Veteran (Service on or after 9/11/2001) (W)  
 Unknown/No Response (X)

**Employment Status:** *(select one)*

- Employed (E)  
 Not in Labor Force, incarcerated or not eligible for employment (N)  
 Employed but with Notice of Termination or in transition Out of military service (S)  
 Unemployed, looking and eligible for employment (U)



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### Single Parent/Single Pregnant Woman: (select one)

- Does Not Apply (Z)
- Single Parent (S)
- Single parent and single pregnant woman (B)
- Single Pregnant Woman (W)

### Displaced Homemaker: (select one)

- Does Not Apply (Z)
- Unemployed, cared for home/family, unpaid (A)
- Previously supported by public assistance or relative, no longer supported (B)
- Parent of child within 2 years of no longer receiving TANF (C)
- Unemployed dependent spouse of a member of the Armed Forces on active duty (D)

WDIS - WIOA

### Status: (check all that apply)

- Limited English Proficiency
- Patient/Resident of medical or special institution (A)
- Attitudes, beliefs, customs, or practices that may be a hindrance to employment (C)
- Previously or currently subject to any stage of the criminal justice process (E)
- None Apply

### Migrant and Seasonal Farmworker: (select one)

- Low-income individual, or their dependent, employed in farming currently unemployed or having difficulty finding work for 12 months out of the last 24 months (A)
- Migrant or seasonal farmworker, or their dependent (B)
- Does Not Apply/Does Not Meet Conditions (N)

### Homeless: (check one)

- Lacks a fixed, regular, and adequate nighttime residence (A)
- Primary residence is a public or private place not designed for regular sleeping accommodation (B)
- Child of migrants who changed schools in last 3 years due to parents' seasonal employment (C)
- Under 18 and Absent from Legal Residence (D)
- Does Not Apply/Does Not Meet Conditions (N)

### Disclosure:

**Have you ever been charged with a violation of the law, misdemeanor and/or felony (even if adjudication was withheld) which resulted in, or, if still pending could result in, probation, community service, restitution, a jail sentence or the revocation or suspension of your driver license? (You are not required to include traffic violations which only resulted in a fine).**

Yes     No    *If your answer was YES:*    When: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Haney Technical Center is committed to the concepts of equal opportunity and equity and complies with Florida Statutes regarding non-discrimination. No person shall, on the basis of gender, marital status, sexual orientation, race, religion, national origin, age or disability, be denied receipt of services, participation in school activities, or access to programs if qualified to receive such services. Haney Technical Center will provide for equitable access to education programs to ensure that impediments related to gender, race, national origin, color, disability, or age do not prevent access for students who wish to participate. Students presenting disabilities through self-report or through the IEP (Individual Education Plan) process will be provided reasonable accommodation as appropriate to help the student achieve success. Students presenting disabilities through self-report or through the IEP (Individual Education Plan) process will be provided reasonable accommodation as appropriate to help the student achieve success.*



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## Student Acknowledgement

- By signing below I consent to the disclosure of the following information when related to an activity or an academic assignment within Bay District Schools, in accordance with The Family Educational Rights and Privacy Act (FERPA) 20 U.S.C. § 1232g:
  - By signing and submitting this application and upon my admission to Haney Technical Center, I understand that my name, quotations, and photographic likeness – including video footage – may be used in all forms of media for advertising, trade, and any other lawful purposes on behalf of Haney Technical Center and that I will not receive now or in the future any compensation for this usage. I also understand that my name, quotations, and photographic likeness may be gathered from and posted to Haney Technical Center’s social media sites and web site and can be downloaded by any computer user on or off campus. I understand that it is my responsibility to notify Haney Technical Center if I refuse to have my name, quotations, or photographic likeness used for unlimited lawful purposes.
- I pledge on my honor that I will neither give nor receive any unauthorized assistance on my assignments/examinations.
- I understand that plagiarism of any kind could result in a failing grade and/or dismissal from the program.
- I understand I am receiving a copy of the Haney Technical Center handbook and will adhere to all the policies contained within.
- I hereby give permission for Haney Technical Center to release my record information for education, accreditation, and/or employment purposes.
- I understand the parking lot and all other areas of the campus are Bay District School’s property. Students should drive with caution when on or near campus, obeying all speed limits and other traffic laws. **The speed limit in the parking lot is five (5) miles per hour.**
- I understand students are to park in the designated parking areas only. Students who park in unauthorized areas may lose the privilege of parking on campus and/or the vehicle may be towed.
- I understand **Students may not loiter around vehicles in the parking area(s). Students shall not occupy vehicles during class, between classes, or before or after school, except as they arrive and leave for the school day.**
- I understand **Students may not smoke in their vehicles while on school property.**
- Vehicles on campus are subject to search by authorized personnel, including law enforcement canine units on routine campus visits, upon reasonable suspicion that the vehicle may contain illegal substances or weapons (i.e., alcohol, drugs, and/or weapons of any kind).
- I understand students must have a parking permit/decals. This will be used to help locate vehicle owners in case the need arises. This also will be helpful if a vehicle has the lights on, is leaking fluid, or is involved in a minor accident with another vehicle when the owner is not present.
- I understand the parking decal is to be displayed on/in the vehicle while parked on campus.

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**My signature on this application is my acknowledgment of and agreement with the statement below:**

I certify that the information contained in this application is true and correct and understand that misrepresentation or omission of information may be cause for rejection or dismissal.

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*Student Signature*

*Date*

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*Parent/Guardian Signature (if student is under 18 years old)*

*Date*